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CONFIRMATION NO. 5437

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|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/643,487 | FILING OR 371(c) DATE 08/19/2003 RULE | CLASS 600 | GROUP ART UNIT 3736 | ATTORNEY DOCKET NO. 281_382NP | |
| APPLICANTS Peter H. Soderberg, Skaneateles, NY; David G. Perkins, Tully, NY; Bonita L. Labosky, Skaneateles, NY; | | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/404,601 08/20/2002 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/13/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u> </u> Examiner's Signature <u> </u> Initials | | STATE OR COUNTRY NY | SHEETS DRAWING 51 | TOTAL CLAIMS 89 | INDEPENDENT CLAIMS 3 |
| ADDRESS 72742 | | | | | |
| TITLE Diagnostic instrument workstation | | | | | |
| FILING FEE RECEIVED 2322 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |